



## General

#### Title

Inflammatory bowel disease (IBD): percentage of patients aged 18 years and older with a diagnosis of IBD who had hepatitis B virus (HBV) status assessed and results interpreted within one year prior to receiving a first course of anti-tumor necrosis factor (TNF) therapy.

### Source(s)

American Gastroenterological Association (AGA). Inflammatory bowel disease (IBD): assessment of hepatitis B virus (HBV) status before initiating anti-TNF (tumor necrosis factor) therapy. Bethesda (MD): American Gastroenterological Association (AGA); 2015 Dec 18. 6 p.

#### Measure Domain

#### Primary Measure Domain

Clinical Quality Measures: Process

# Secondary Measure Domain

Does not apply to this measure

# **Brief Abstract**

## Description

This measure is used to assess the percentage of patients aged 18 years and older with a diagnosis of inflammatory bowel disease (IBD) who had hepatitis B virus (HBV) status assessed and results interpreted within one year prior to receiving a first course of anti-tumor necrosis factor (TNF) therapy.

#### Rationale

Before initiating biologic anti-tumor necrosis factor (TNF) therapy for a patient with inflammatory bowel disease (IBD), it is essential to screen the patient for hepatitis B virus (HBV), as research has documented reactivation of HBV after anti-TNF therapy. This is a patient safety measure.

Opportunity for improvement: While there are a limited number of studies that investigate gaps in care for patients with IBD, the research that does exist identifies opportunities for improvement in care areas:

1) there is a lack of adherence to documentation of HBV screening, most noticeably in the use of disease-modifying anti-TNF drugs, and 2) variations in care by practice setting, geographic region and physician specialty.

Reactivation of hepatitis B virus has been reported in patients who are carriers of this virus and are taking TNF blocker medicines (Kaiser et al., 2009).

Clinical Recommendation Statements:

Infliximab can reactivate latent HBV (Esteve et al., 2004).

#### Evidence for Rationale

American Gastroenterological Association (AGA). Inflammatory bowel disease (IBD): assessment of hepatitis B virus (HBV) status before initiating anti-TNF (tumor necrosis factor) therapy. Bethesda (MD): American Gastroenterological Association (AGA); 2015 Dec 18. 6 p.

Esteve M, Saro C, GonzÃilez-Huix F, Suarez F, Forné M, Viver JM. Chronic hepatitis B reactivation following infliximab therapy in Crohn's disease patients: need for primary prophylaxis. Gut. 2004 Sep;53(9):1363-5. PubMed

Kaiser T, Moessner J, Patel K, McHutchison JG, Tillmann HL. Life threatening liver disease during treatment with monoclonal antibodies. BMJ. 2009;338:b508. PubMed

#### Primary Health Components

Inflammatory bowel disease (IBD); hepatitis B virus (HBV); anti-TNF (tumor necrosis factor) therapy

## **Denominator Description**

All patients aged 18 years and older with a diagnosis of inflammatory bowel disease (IBD) (see the related "Denominator Inclusions/Exclusions" field)

# **Numerator Description**

Patients who had hepatitis B virus (HBV) status assessed and results interpreted within one year prior to receiving a first course of anti-tumor necrosis factor (TNF) therapy (see the related "Numerator Inclusions/Exclusions" field)

# Evidence Supporting the Measure

# Type of Evidence Supporting the Criterion of Quality for the Measure

A clinical practice guideline or other peer-reviewed synthesis of the clinical research evidence

One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

## Additional Information Supporting Need for the Measure

## **Extent of Measure Testing**

Unspecified

### State of Use of the Measure

#### State of Use

Current routine use

#### Current Use

not defined yet

# Application of the Measure in its Current Use

#### Measurement Setting

Ambulatory/Office-based Care

# Professionals Involved in Delivery of Health Services

not defined yet

# Least Aggregated Level of Services Delivery Addressed

Individual Clinicians or Public Health Professionals

## Statement of Acceptable Minimum Sample Size

Specified

# Target Population Age

Age greater than or equal to 18 years

# **Target Population Gender**

Either male or female

# National Strategy for Quality Improvement in Health Care

#### National Quality Strategy Aim

Better Care

# National Quality Strategy Priority

Making Care Safer Prevention and Treatment of Leading Causes of Mortality

# Institute of Medicine (IOM) National Health Care Quality Report Categories

#### **IOM Care Need**

Living with Illness

#### **IOM Domain**

Effectiveness

Safety

## Data Collection for the Measure

# Case Finding Period

The reporting period (January 1 through December 31)

# Denominator Sampling Frame

Patients associated with provider

# Denominator (Index) Event or Characteristic

Clinical Condition

Encounter

Patient/Individual (Consumer) Characteristic

#### **Denominator Time Window**

not defined yet

# Denominator Inclusions/Exclusions

Inclusions

All patients aged 18 years and older with a diagnosis of inflammatory bowel disease (IBD)

Denominator Criteria (Eligible Cases):

Patients aged greater than or equal to 18 years on date of encounter

AND

Diagnosis for IBD (International Classification of Diseases, Tenth Revision, Clinical Modification [ICD-10-CM] codes): K50.00, K50.011, K50.012, K50.013, K50.014, K50.018, K50.019, K50.10, K50.111, K50.112, K50.113, K50.114, K50.118, K50.119, K50.80, K50.811, K50.812, K50.813, K50.814, K50.818, K50.819, K50.90, K50.911, K50.912, K50.913, K50.914, K50.918, K50.919, K51.00, K51.011, K51.012, K51.013, K51.014, K51.018, K51.019, K51.20, K51.211, K51.212, K51.213, K51.214, K51.218, K51.219, K51.30, K51.311, K51.312, K51.313, K51.314, K51.318, K51.319, K51.40, K51.411, K51.412, K51.413, K51.414, K51.418, K51.419, K51.50, K51.511, K51.512, K51.513, K51.514, K51.518, K51.519, K51.80, K51.811, K51.812, K51.813, K51.814, K51.818, K51.819, K51.90, K51.911, K51.912, K51.913, K51.914, K51.918, K51.919

AND

Patient encounter during the reporting period (refer to the original measure documentation for specific Current Procedural Terminology [CPT] codes)

Exclusions

None

#### Exclusions/Exceptions

not defined yet

## Numerator Inclusions/Exclusions

Inclusions

Patients who had hepatitis B virus (HBV) status assessed and results interpreted within one year prior to receiving a first course of anti-tumor necrosis factor (TNF) therapy\*

Note: HBV status must be assessed by one of the following: hepatitis B surface antigen (HBsAG), HBsAG neutralization, hepatitis B core antibody (HBcAB) total, HBcAB immunoglobulin M (IgM), hepatitis B surface antibody (HBsAB).

\*First Course of Anti-TNF Therapy: The first (ever) course of anti-TNF therapy

Exclusions

Documentation of patient reason(s) for not assessing hepatitis B virus (HBV) status (e.g., patient not receiving a first course of anti-TNF therapy, patient declined) within one year prior to first course of anti-TNF therapy

# Numerator Search Strategy

Fixed time period or point in time

#### **Data Source**

Administrative clinical data

Registry data

#### Type of Health State

Does not apply to this measure

## Instruments Used and/or Associated with the Measure

Unspecified

# Computation of the Measure

### Measure Specifies Disaggregation

Does not apply to this measure

### Scoring

Rate/Proportion

#### Interpretation of Score

Desired value is a higher score

#### Allowance for Patient or Population Factors

not defined yet

# Standard of Comparison

not defined yet

# **Identifying Information**

# Original Title

Measure #275: inflammatory bowel disease (IBD): assessment of hepatitis B virus (HBV) status before initiating anti-TNF (tumor necrosis factor).

#### Measure Collection Name

Inflammatory Bowel Disease

#### Submitter

American Gastroenterological Association - Medical Specialty Society

# Developer

American Gastroenterological Association - Medical Specialty Societ
---

Physician Consortium for Performance Improvement® - Clinical Specialty Collaboration

## Funding Source(s)

Unspecified

### Composition of the Group that Developed the Measure

Unspecified

#### Financial Disclosures/Other Potential Conflicts of Interest

Unspecified

#### Core Quality Measures

Gastroenterology

#### Measure Initiative(s)

Physician Quality Reporting System

#### Adaptation

This measure was not adapted from another source.

## Date of Most Current Version in NQMC

2015 Dec

#### Measure Maintenance

Unspecified

## Date of Next Anticipated Revision

2017

#### Measure Status

This is the current release of the measure.

# Measure Availability

Source not available electronically.

For more information, contact the American Gast	roenterological Association (AGA) at 4930 Del Ray
Avenue, Bethesda, MD 20814; Phone: 301-654-2	055; Fax: 301-654-5920; E-mail: measures@gastro.org
Web site: www.gastro.org	

#### **NQMC Status**

This NQMC measure summary was completed by ECRI Institute on March 14, 2016. The information was verified by the measure developer on March 29, 2016.

#### Copyright Statement

This NQMC summary is based on the original measure, which is subject to the measure developer's copyright restrictions.

The Measures are not clinical guidelines, do not establish a standard of medical care, and have not been tested for all potential applications.

The Measures, while copyrighted, can be reproduced and distributed, without modification, for noncommercial purposes, e.g., use by health care providers in connection with their practices. Commercial use is defined as the sale, license, or distribution of the Measures for commercial gain, or incorporation of the Measures into a product or service that is sold, licensed or distributed for commercial gain.

Commercial uses of the Measures require a license agreement between the user and the American Medical Association (AMA), (on behalf of the Physician Consortium for Performance Improvement® [PCPI®]) or American Gastroenterological Association (AGA). Neither the AMA, AGA, PCPI, nor its members shall be responsible for any use of the Measures.

The AMA's and PCPI's significant past efforts and contributions to the development and updating of the Measures is acknowledged. AGA is solely responsible for the review and enhancement ("Maintenance") of the Measures as of June 30, 2014.

AGA encourages use of the Measures by other health care professionals, where appropriate.

THE MEASURES AND SPECIFICATIONS ARE PROVIDED "AS IS" WITHOUT WARRANTY OF ANY KIND.

© 2015 American Medical Association and American Gastroenterological Association. All Rights Reserved. Applicable FARS/DFARS Restrictions Apply to Government Use.

Limited proprietary coding is contained in the Measure specifications for convenience. Users of the proprietary code sets should obtain all necessary licenses from the owners of these code sets. The AMA, AGA, the PCPI and its members disclaim all liability for use or accuracy of any Current Procedural Terminology (CPT®) or other coding contained in the specifications.

CPT® contained in the Measures specifications is copyright 2004-2014 American Medical Association. LOINC® copyright 2004-2013 Regenstrief Institute, Inc. SNOMED CLINICAL TERMS (SNOMED CT®) copyright 2004-2013 College of American Pathologists. All Rights Reserved.

# Production

## Source(s)

American Gastroenterological Association (AGA). Inflammatory bowel disease (IBD): assessment of hepatitis B virus (HBV) status before initiating anti-TNF (tumor necrosis factor) therapy. Bethesda (MD): American Gastroenterological Association (AGA); 2015 Dec 18. 6 p.

#### Disclaimer

#### **NQMC** Disclaimer

The National Quality Measures Clearinghouseâ, ¢ (NQMC) does not develop, produce, approve, or endorse the measures represented on this site.

All measures summarized by NQMC and hosted on our site are produced under the auspices of medical specialty societies, relevant professional associations, public and private organizations, other government agencies, health care organizations or plans, individuals, and similar entities.

Measures represented on the NQMC Web site are submitted by measure developers, and are screened solely to determine that they meet the NQMC Inclusion Criteria.

NQMC, AHRQ, and its contractor ECRI Institute make no warranties concerning the content or its reliability and/or validity of the quality measures and related materials represented on this site. Moreover, the views and opinions of developers or authors of measures represented on this site do not necessarily state or reflect those of NQMC, AHRQ, or its contractor, ECRI Institute, and inclusion or hosting of measures in NQMC may not be used for advertising or commercial endorsement purposes.

Readers with questions regarding measure content are directed to contact the measure developer.